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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	art 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Marjorie First name D Middle name Piadozo Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0072					

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Case number (if known)

Debtor 1 Marjorie D Piadozo

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 850 Wetmoreland Dr Apt 18 Vernon Hills, IL 60061 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Lake County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Marjorie D Piadozo

Par	Tell the Court About	our B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chapter 7					
		□ с	hapter 11				
		_	hapter 12				
		□ с	hapter 13				
			·				
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
						on, sign and attach the Application for Indi	ividuals to Pay
			Ū		s (Official Form 103A). ived (You may request this option	n only if you are filing for Chapter 7. By la	w. a judge mav.
		_	but is not req applies to you	uired to, waive y ur family size an	our fee, and may do so only if yo d you are unable to pay the fee ir	ur income is less than 150% of the officia n installments). If you choose this option, ial Form 103B) and file it with your petition	I poverty line that you must fill out
9. Have you filed for bankruptcy within the last 8 years?							
			District		When	Case number	
			District		When	0	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No)				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□No	o. Go to I	ine 12.			
	residence?	■ Ye	es. Has yo	our landlord obta	ined an eviction judgment agains	t you?	
				No. Go to line 1	12.		
			_	Yes. Fill out <i>Init</i> bankruptcy peti		Judgment Against You (Form 101A) and f	ile it with this

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Document Case number (if known) Debtor 1 Marjorie D Piadozo

art	3: Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name and location of business			
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Stat	te & ZIP Code	
	it to this petition.		Check the appropriate box to describe your business:			
				☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	lefined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	е	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropri- ines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemen tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced U.S.C. 1116(1)(B).			
	For a definition of small	No.	ı am ı	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
art	4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code	
					Number, Street, City, State & Zip Code	

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Debtor 1 Marjorie D Piadozo

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Marjorie D Piadoz		DOC 1	Document	Page 6 of 59	Case number (if known)	Desc Main
Part	6: Answer These Quest	ions for R	eporting Purpo	ses			
	What kind of debts do you have?	16a.	Are your debt				U.S.C. § 101(8) as "incurred by an
	you have:		□ No. Go to lii	,	my, or nouseriola pa	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			Yes. Go to I				
		16b.	Are your debt	s primarily business		bts are debts that you ir on of the business or in	
			□ No. Go to li		or unough the operati	on or the business of the	ive our remains
			☐ Yes. Go to II				
		16c.		of debts you owe that	are not consumer del	ots or business debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing u	under Chapter 7. Go to	line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		er Chapter 7. Do you e unds will be available to			cluded and administrative expense
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	1 -49			☐ 1,000-5,000		25,001-50,000
	you estimate that you owe?	□ 50-99)		5001-10,000		50,001-100,000
		☐ 100-1 ☐ 200-9		L	10,001-25,000	ШN	More than100,000
19.	How much do you	\$ 0 - \$	\$50.000		□ \$1,000,001 - \$10 m	nillion 🔲 🕏	\$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,0	001 - \$100,000		\$10,000,001 - \$50		\$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million		□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		610,000,000,001 - \$50 billion More than \$50 billion
20.	How much do you	\$0 - \$	550.000		☐ \$1,000,001 - \$10 m	nillion 🔲 🕏	6500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000		\$10,000,001 - \$50		\$1,000,000,001 - \$10 billion
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			☐ \$50,000,001 - \$100 ☐ \$100,000,001 - \$50		\$10,000,000,001 - \$50 billion More than \$50 billion
Part	7: Sign Below						
For	you	I have ex	kamined this peti	ition, and I declare und	ler penalty of perjury	that the information pro	vided is true and correct.
							apter 7, 11,12, or 13 of title 11, roceed under Chapter 7.
				me and I did not pay o			ney to help me fill out this
		I reques	t relief in accorda	ance with the chapter o	of title 11, United State	es Code, specified in th	is petition.
		bankrupt and 357	tcy case can resi 1.	ult in fines up to \$250,0	ling property, or obtai 200, or imprisonment	ning money or property for up to 20 years, or b	by fraud in connection with a oth. 18 U.S.C. §§ 152, 1341, 1519
			jorie D Piadoz e D Piadozo	:0	Signa	ture of Debtor 2	
			e of Debtor 1		- 9		

Executed on

MM / DD / YYYY

Executed on January 2, 2018
MM / DD / YYYY

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Debtor 1 Marjorie D Piadozo Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph	R. Doyle	Date	January 2, 2018	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Joseph R.	Doyle 6279065			
Printed name				
Bizar & Do	yle, LLC			
Firm name				-
123 West N	//adison Street			
Suite 205				
Chicago, II	L 60602			
Number, Street, 0	City, State & ZIP Code			
Contact phone	312-427-3100	Email address	joe@bizardoylelaw.com	
6279065				
Bar number & St	ate			

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

every question.						
Part 7: Sign Below						
For you	I have examined this petition, and I declare under	penalty of perjury that the information provided is true and correct.				
		e that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title ole under each chapter, and I choose to proceed under Chapter 7.	11,			
	If no attorney represents me and I did not pay or a document, I have obtained and read the notice re	gree to pay someone who is not an attorney to help me fill out this quired by 11 U.S.C. § 342(b).				
	I request relief in accordance with the chapter of t	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
	l understand making a false statement, concealing bankruptcy case can result in fines up to \$250,000 and 3571.	property, or obtaining money or property by fraud in connection with 0, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341	a , 1519,			
	Marjorie D Piadozo	Signature of Debtor 2				
	Signature of Debtor 1	E I. I				
	Executed on 8 12 2011 MM / DD / YYYY	Executed on MM / DD / YYYY				

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Case number (if known)

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

6279065Bar number & State

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the

Signature of Atterney for Bebtor

Joseph R. Doyle

Printed name

Bizar & Doyle, LLC

Firm name

123 West Madison Street
Suite 205
Chicago, IL 60602

Number, Street, City, State & ZIP Code

Contact phone 312-427-3100

Email address joe@bizardoylelaw.com

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Fill in this infor	mation to identify yo	ur case:			
Debtor 1	Marjorie D Piac	dozo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the	e: NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Form					
Declarat	tion About	an Individua	I Debtor's Sc	hedules	12/15
If two married p	eople are filing toget	her, both are equally resp	onsible for supplying corr	ect information.	
You must file thi	is form whenever yo	u file bankruptcy schedule	es or amended schedules.	Making a false statement,	concealing property, or
obtaining mone		d in connection with a bar		n fines up to \$250,000, or in	
years, or bour. I	10 U.S.C. 99 152, 154	1, 1519, and 5571.			
Sig	n Below				
Did you pa	ay or agree to pay so	meone who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
■ No				•	
☐ Yes.	Name of person				Petition Preparer's Notice,
				Declaration, and S	Signature (Official Form 119)
Under pena that they ar	alty of perjury, I declare te true and correct.	are that I have read the sur	mmary and schedules filed	d with this declaration and	
× Im	Waln		x		
	rie D Piadozo		Signature of I	Debtor 2	
Signatu	re of Debtor 1				
Date _	8/2/2017		Date		

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Fill in this inforr	mation to identify your	case:			
Debtor 1	Marjorie D Piadoz	0			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					
(if known)				☐ Check if this is an amended filing	
Official Fo		ffairs for Indivi	duals Filing for Bar	okruptev	4/1
			-	ually responsible for supplying correct	-4/ 1
Part 12: Sign E I have read the a	n). Answer every quest Below nswers on this <i>Statem</i> e	ion. ent of Financial Affairs a	nd any attachments, and I decla	Iditional pages, write your name and cas are under penalty of perjury that the answing money or property by fraud in conn	wers
with a bankruptc	cy case can result in fin , 1341, 1519, and 3571.	es up to \$250,000, or imp	prisonment for up to 20 years, o	r both.	
Mindo					
Marjorie D Pia Signature of De		Signa	ture of Debtor 2		
Date 82	17	Date			
Did you attach ad No	dditional pages to <i>You</i>	Statement of Financial A	Affairs for Individuals Filing for	Bankruptcy (Official Form 107)?	
□ Yes					
Did you pay or a	gree to pay someone w	ho is not an attorney to	help you fill out bankruptcy for	ns?	
☐ Yes. Name of I	Person Attach th	e Bankruptcy Petition Pre	parer's Notice, Declaration, and S	ignature (Official Form 119).	

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Fill in this inform	mation to identify your	case:				
Debtor 1	Marjorie D Piadoz	20				
	First Name	Middle Name	Last Name	-		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	_		
Case number						
(if known)				☐ Check if this is an amended filing		
	Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7					
	f perjury, I declare that subject to an unexpired		ntion about any property of my estate t	hat secures a debt and any personal		
x Mh	Som		X			
Marjorie D) Piadozo		Signature of Debtor 2			
Signature o	f Debtor 1					
Date	8/2/17		Date			

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		Docume	<u>nt Page 13 of 59</u>	9	
Fill in this inforn	nation to identify your	case:			
Debtor 1	Marjorie D Piadoz	ZO			
	First Name	Middle Name	Last Name	-	
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					☐ Check if this is an
, 					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,270.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,270.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	84.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	28,916.00
	Your total liabilities	\$	29,000.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,169.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,295.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 14 of 59 Case number (if known) Debtor 1 Marjorie D Piadozo

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

6,925.50 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	84.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	84.00

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				Document	Page 15 of 59			
Fill in	this informa	ation to identify your	case and	this filing:				
Debtor	· 1	Marjorie D Piado	ZO					
		First Name		dle Name	Last Name			
Debtor (Spouse,		First Name	Midd	dle Name	Last Name			
		cruptov Court for the	NODTHE	RN DISTRICT OF ILL	INOIS			
United	States Dani	kruptcy Court for the:	NORTHE	KN DISTRICT OF ILL	INOIS			
Case r	number				_			Check if this is an
								amended filing
Offic	ial For	m 106A/B						
Sch	edule	A/B: Prop	ertv					12/15
				t an asset only once. If	an asset fits in more than one	category, list the ass	et in the	category where you
					ble are filing together, both are the top of any additional pages			
	every questi		. и сори. и с		o top or any addinonal pages	, , caa a		
Part 1:	Describe Ea	ach Residence, Building	g, Land, or C	Other Real Estate You C	own or Have an Interest In			
1 Day	b		la interest in	any rasidanas buildin	n land or similar property?			
1. DO ус	ou own or na	ve any legal or equitable	ie interest in	any residence, building	g, land, or similar property?			
■ No	o. Go to Part 2	2.						
☐ Ye	es. Where is t	he property?						
Part 2:	Describe V	our Vehicles						
rait 2.	Describe 1	our vernoles						
					whether they are registere		ny vehicl	es you own that
someor	ne else drive	s. If you lease a vehic	cle, also rep	ort it on Schedule G:	Executory Contracts and Une	expired Leases.		
3. Cars	s, vans, truc	ks, tractors, sport u	tility vehic	les, motorcycles				
□ N								
	-							
Y	es							
3.1	Make: N	issan	,	Who has an interest in t	he property? Chack and	Do not deduct secure	ed claims	or exemptions. Put
		uest		Debtor 1 only	ine property: Gleck one	the amount of any se Creditors Who Have		
		008		Debtor 2 only				
	Approximate			Debtor 1 and Debtor 2	2 only	Current value of the entire property?		urrent value of the ortion you own?
_	Other informa	ition:		\square At least one of the deb	otors and another			
,	Value base	ed on NADA		-		\$2,775.0	10	\$2,775.00
			'	Check if this is comr (see instructions)	nunity property	Ψ2,773.0		φ2,113.00
1 18/04	avavaft aiva	roft mater homes. A	TVo and a	than regrestional yel	sialaa athar yahialaa and s			
					nicles, other vehicles, and a snowmobiles, motorcycle acc			
	•				•			
■ N	0							
☐ Y	es							
			_			Г		
					from Part 2, including any e			\$2,775.00
.pug	jes you nav	c attached for Tart 2	Willo tila	Transport from Commission				
Part 3:	Describe Yo	our Personal and Hous	sehold Items					
		ive any legal or equit			wing items?		Curr	ent value of the
								ion you own?
								not deduct secured ns or exemptions.
6 Hou	sehold goo	ds and furnishings					2.0.11	

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

	Case 18-00028	Doc 1	Filed 01/02/18 Document	Entered 01/02/18 13:51:26 Page 16 of 59	Desc Main
Debtor 1	Marjorie D Piadozo		Document	Case number (if known)	
■ Yes.	Describe				
	Miscell	laneous us	ed household goods	3	\$1,200.00
□ No	les: Televisions and radios; including cell phones, c	cameras, med	lia players, games	oment; computers, printers, scanners; music c	
	Miscell	laneous Ele	ectronics		\$235.00
<i>Exampl</i> □ No	bles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, coin	, or baseball card collections;
	Miscell	laneous bo	oks, tapes, CD's, etc).	\$80.00
■ No □ Yes. 10. Firearm Examp ■ No □ Yes. 11. Clother Examp □ No	musical instruments Describe ms ples: Pistols, rifles, shotguns Describe	s, ammunitior	n, and related equipmen		
	Person	nal used clo	othing		\$350.00
□ No	ples: Everyday jewelry, cost Describe		engagement rings, wed	ding rings, heirloom jewelry, watches, gems, ç	gold, silver
Examp ■ No	nrm animals ples: Dogs, cats, birds, hors Describe	ses			
14. Any ot	her personal and househ	old items yo	u did not already list, i	ncluding any health aids you did not list	
	Give specific information				
	the dollar value of all of yo art 3. Write that number h			ny entries for pages you have attached	\$1,915.00

Official Form 106A/B Schedule A/B: Property

page 2

Case 18-00028 Doc 1 Filed 01/02/18 Entered 01/02/18 13:51:26 Desc Main Document Page 17 of 59 Case number (if known) Debtor 1 Marjorie D Piadozo Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... \$300.00 **Chase Bank** 17.1. Checking **Chase Bank** \$300.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No

Yes. List each account separately.

Type of account:

Institution name:

401(k)

401(k) through employer - 100% exempt

Unknown

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No □ Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

	Case 18-0002	9 DOC 1	Document	Page 18 of 59	2/16 13.51.20	Desc Main
Debtor 1	Marjorie D Piadoz	0	Document		ase number (if known)	
25. Trusts ■ No	s, equitable or future in	terests in prope	rty (other than anythin	g listed in line 1), and	rights or powers exe	ercisable for your benefit
☐ Yes.	. Give specific information	on about them				
	ts, copyrights, trademanples: Internet domain na				s	
	. Give specific information	on about them				
_Exam	ses, franchises, and other ples: Building permits, ex			holdings, liquor license	es, professional licens	es
■ No □ Yes.	. Give specific information	on about them				
Money or	r property owed to you?	?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re □ No	efunds owed to you					
= :::	. Give specific informatio	n about them, inc	luding whether you alrea	ady filed the returns and	d the tax years	
					ı	
		Estin	nated Tax Refund		Federal	\$1,980.00
■ No □ Yes.	nples: Past due or lump s Give specific informatio	n	isai support, o ilia suppo	nt, maintenance, divorc	е зешенен, рюрену	Schollen
Exam	amounts someone own ples: Unpaid wages, disabenefits; unpaid los. Give specific information.	ability insurance p ans you made to		efits, sick pay, vacation	pay, workers' compe	nsation, Social Security
31. Intere : <i>Exam</i> □ No	sts in insurance policients apples: Health, disability, o	e s r life insurance; h		HSA); credit, homeowne	er's, or renter's insural	nce
■ Yes.	. Name the insurance co C	mpany of each po company name:	licy and list its value.	Beneficiary	<i>y</i> :	Surrender or refund value:
		imployer - Terr ash surrender	n Life Insurance - no value	Spouse/I	Kids	\$0.00
		ransamerica - o cash surren	Whole Life Insurand der value	ce - Spouse/l	Kids	Unknown
If you some	nterest in property that are the beneficiary of a lone has died. . Give specific information	living trust, expec	someone who has die t proceeds from a life ins	d surance policy, or are c	urrently entitled to rec	eive property because

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Case 18-00028

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Case number (if known) Document Debtor 1 Marjorie D Piadozo 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,580.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 5 5 5 5

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$2,775.00	_	
57.	Part 3: Total personal and household items, line 15		\$1,915.00		
58.	Part 4: Total financial assets, line 36		\$2,580.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$7,270.00	Copy personal property total	\$7,270.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$7,270.00

Official Form 106A/B Schedule A/B: Property page 5 Case 18-00028 Doc 1 Filed 01/02/18 Entered 01/02/18 13:51:26 Desc Main

		TAKAMIK.	111 1 111/11 7 (7 (7) 1/1/	
Fill in this infor	mation to identify your	case:		
Debtor 1	Marjorie D Piadoz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$2,775.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$2,775.00		\$375.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$1,200.00		\$1,200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$235.00		\$235.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$80.00		\$80.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
	\$2,775.00 \$1,200.00 \$235.00	\$2,775.00	Check only one box for each exemption. \$2,775.00 \$2,400.00 100% of fair market value, up to any applicable statutory limit \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,35.00 \$2,400.00 \$375.00 \$375.00 \$1,200.00 \$1,00% of fair market value, up to any applicable statutory limit \$235.00 \$235.00 \$235.00 \$235.00 \$20% of fair market value, up to any applicable statutory limit

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Case number (if known)

	marjorio 2 i ladozo						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Personal used clothing Line from Schedule A/B: 11.1	\$350.00		\$350.00	735 ILCS 5/12-1001(a)		
	Ellie Holli Geriedale PVB.			100% of fair market value, up to any applicable statutory limit			
	Miscellaneous costume jewelry Line from Schedule A/B: 12.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)		
	Ellie Holli Geriedale PVB. 12.1			100% of fair market value, up to any applicable statutory limit			
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)		
	Ellie Holli Gerledale PAB. 17.1			100% of fair market value, up to any applicable statutory limit			
	Savings: Chase Bank Line from Schedule A/B: 17.2	\$300.00		\$300.00	735 ILCS 5/12-1001(b)		
	Ellie Holli Galledale PAB. TT-12			100% of fair market value, up to any applicable statutory limit			
	401(k): 401(k) through employer - 100% exempt	Unknown		100%	735 ILCS 5/12-704		
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit			
	Federal: Estimated Tax Refund Line from Schedule A/B: 28.1	\$1,980.00		\$1,980.00	735 ILCS 5/12-1001(g)(1)		
	Zino nom osnodalo 702. Zeri			100% of fair market value, up to any applicable statutory limit			
	Transamerica - Whole Life Insurance - no cash surrender value	Unknown		100%	215 ILCS 5/238		
	Beneficiary: Spouse/Kids Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cover	3 years after that for ca	ases fi	,	,		
	□ No □ Yes	od by the exemption w	umi I	,210 days before you filed this case	•		

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Marjorie D Piado	zo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Documen	t Page	23 of 5	59	_	
Fill in this inforr	nation to identify your c	ase:					
Debtor 1	Marjorie D Piadozo)					
	First Name	Middle Name	Last Nam	е			
Debtor 2	First Name	Middle News	Leat New				
(Spouse if, filing)	First Name	Middle Name	Last Nam	e			
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS				
Case number							
(if known)						☐ Chec	k if this is an
						amen	nded filing
Official Forn	0 106E/E						
		no Have Unsecur	ad Claim	6			12/15
		Part 1 for creditors with PRI			r creditors with NO	IPPIOPITY claims	
		hat could result in a claim. A					
Schedule G: Execu	tory Contracts and Unexpir	ed Leases (Official Form 106	G). Do not inclu	ude any cre	ditors with partially	secured claims that	are listed in
		red by Property. If more space. If you have no information					
name and case nur		,		,		op or any additions	pagee,e year
Part 1: List A	II of Your PRIORITY Uns	secured Claims					
1. Do any credito	ors have priority unsecured	claims against you?					
☐ No. Go to P	art 2.						
Yes.							
		If a creditor has more than one both priority and nonpriority as					
possible, list the	e claims in alphabetical order	according to the creditor's nar ticular claim, list the other credi	ne. If you have n				
(For an explana	ation of each type of claim, se	ee the instructions for this form	in the instruction	booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1 IL Depa	rtment of Revenue*	Last 4 digits of a	ccount number	0072	\$84.00		
•	editor's Name						
PO BO		When was the de	bt incurred?	2016		_	
	treet City State Zlp Code	As of the date yo	u file, the claim	is: Check a	II that apply		
Who incurred	d the debt? Check one.	☐ Contingent					
■ Debtor 1 d	only	☐ Unliquidated					
Debtor 2 o	only	☐ Disputed					
_	and Debtor 2 only	Type of PRIORIT	Y unsecured cla	aim:			
	ne of the debtors and another	☐ Domestic supp	ort obligations				
_	his claim is for a communi	_		vou owo tho	government		
	subject to offset?	☐ Claims for dea	•		•		
■ No	subject to onset?		iii oi personai iii	july wille yo	u were intoxicated		
☐ Yes		Other. Specify	Taxes				_
Part 2: List A	II of Your NONPRIORITY	' Unsecured Claims					
3. Do any credito	ors have nonpriority unsecu	red claims against you?					
☐ No. You ha	ve nothing to report in this pa	rt. Submit this form to the court	with your other	schedules.			
Yes.							
		ima in the plaketestical color	of the g	الماما ماس	and plains If "	tor boo mo th	a nannulault :
unsecured clair	m, list the creditor separately	ims in the alphabetical order for each claim. For each claim t the other creditors in Part 3 If	listed, identify w	hat type of cl	aim it is. Do not list c	aims already include	d in Part 1. If more

Total claim

Part 2.

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Debtor 1 Marjorie D Piadozo Case number (if know) **American Medical Collection** 0072 \$127.00 4.1 Last 4 digits of account number Agency Nonpriority Creditor's Name 4 Westchester Plaza When was the debt incurred? 2017 **Building 4** Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No **Collection Account for Laboratory** ☐ Yes Other Specify Corporation of America 4.2 **Bk Of Amer** Last 4 digits of account number 4937 \$5,745.00 Nonpriority Creditor's Name Opened 12/07 Last Active Po Box 982238 When was the debt incurred? 6/15/15 El Paso, TX 79998 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Blitt & Gaines** 0072 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 661 Glenn Ave. When was the debt incurred? 2017 Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Account for Capital One Bank.

☐ Yes

■ Other. Specify Notice only.

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Debtor 1 Marjorie D Piadozo Case number (if know) 4.4 \$0.00 **Capital Management Services** Last 4 digits of account number 0072 Nonpriority Creditor's Name 726 Exchange St. When was the debt incurred? 2017 Suite 700 Buffalo, NY 14210 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Account for One Main ☐ Yes 4.5 **Capital One** Last 4 digits of account number 2871 \$1,106.00 Nonpriority Creditor's Name Opened 03/08 Last Active 15000 Capital One Dr When was the debt incurred? 10/23/15 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.6 **Capital One** Last 4 digits of account number 7680 \$948.00 Nonpriority Creditor's Name Opened 12/13 Last Active 15000 Capital One Dr When was the debt incurred? 11/09/15 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Marjorie D Piadozo Case number (if know) 4.7 \$0.00 Convergent Last 4 digits of account number 0072 Nonpriority Creditor's Name PO Box 1022 When was the debt incurred? 2017 Wixom, MI 48393 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Account for Comenity Capital** Other. Specify ☐ Yes Bank 4.8 **Dsnb Macys** Last 4 digits of account number 9150 \$1,450.00 Nonpriority Creditor's Name Opened 11/08 Last Active Po Box 8218 When was the debt incurred? 6/26/15 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.9 **First Source** 0072 \$1,577.00 Last 4 digits of account number Nonpriority Creditor's Name 205 Bryant Woods South When was the debt incurred? 2017 Buffalo, NY 14228 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Account for TD Bank** ☐ Yes

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Case number (if know)

Debtor 1 Marjorie D Piadozo 4.1 Harris & Harris, Ltd. 0072 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 111 West Jackson Blvd. When was the debt incurred? 2017 Suite 400 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Account for Northshore** Other. Specify ☐ Yes **University Heathsystem** 0072 \$147.00 Lab Corp Last 4 digits of account number Nonpriority Creditor's Name PO Box 2240 When was the debt incurred? 2016 **Burlington, NC 27216** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.1 Lake Forest Pediatrics 0072 \$220.00 Last 4 digits of account number Nonpriority Creditor's Name 900 N Westmoreland Rd., #110 When was the debt incurred? 2017 Lake Forest, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Medical ☐ Yes Other. Specify

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Case number (if know) Debtor 1 Marjorie D Piadozo 4.1 **LCA Collections** 0072 \$998.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 2240 When was the debt incurred? 2017 **Burlington, NC 27216** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Account for Assoc of Lake ☐ Yes Other. Specify Forest 4.1 0072 \$0.00 LTD Financial Services, LP Last 4 digits of account number Nonpriority Creditor's Name 7322 Southwest Freeway 2017 When was the debt incurred? **Suite 1600** Houston, TX 77074 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Account ☐ Yes 4.1 Midland Funding 8911 \$1,162.00 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Dr Ste 30 When was the debt incurred? **Opened 12/16** San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony**

☐ Yes

Bank

Other. Specify

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Debtor 1 Marjorie D Piadozo Case number (if know) Northshore University Health 4.1 0072 \$1,643.00 6 Last 4 digits of account number System Nonpriority Creditor's Name 9532 Eagle Way When was the debt incurred? 2017 Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Medical Other. Specify 4.1 **Northwestern Medicine** 0072 \$26.00 Last 4 digits of account number Nonpriority Creditor's Name 28155 Network Place When was the debt incurred? 2017 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.1 0072 \$9.00 **OB Gyne Associates of Lake Forest** Last 4 digits of account number Nonpriority Creditor's Name 700 Westmoreland Rd. When was the debt incurred? 2017 **Building C** Lake Forest, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical

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Case number (if know) Debtor 1 Marjorie D Piadozo 4.1 Onemain 2726 \$5,337.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 05/14 Last Active Po Box 1010 When was the debt incurred? 5/22/15 Evansville, IN 47706 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Secured Other. Specify 4.2 **Pinnacle Management Services** 0072 \$748.00 Last 4 digits of account number Nonpriority Creditor's Name 514 Market Loop, Suite 103 When was the debt incurred? 2017 **Dundee, IL 60118** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Account for Northshore** ☐ Yes Other. Specify University 4.2 Portfolio Recovery Ass 9422 \$5.258.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 03/16** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Factoring Company Account Synchrony ☐ Yes Other. Specify Bank

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Case number (if know)

Debto	Marjorie D Piadozo	——————————————————————————————————————	Case number (if know)	
4.2	Portfolio Recovery Ass	Last 4 digits of account number	6806	\$838.00
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 02/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	■ Other. Specify Bank	Company Account Synchrony	
4.2	Sanjay S. Jutla	Last 4 digits of account number	0072	\$0.00
	Nonpriority Creditor's Name 55 E. Jackson, 16th Floor Chicago, IL 60604	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection Notice only	Account for Portfolio Recovery.	
4.2	Td Bank Usa/targetcred Nonpriority Creditor's Name	Last 4 digits of account number	6481	\$1,577.00
	Po Box 673 Minneapolis, MN 55440	When was the debt incurred?	Opened 02/13 Last Active 6/08/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other, Specify Credit Card	1	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Marjorie D Piadozo

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	84.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ———	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	Ψ	
	ou.	Other. Add all other priority dissecuted dailins. Write that amount here.	ou.	Φ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	84.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	28,916.00
	e:		e:	·	22.242.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	28,916.00

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			111 FAUE 33 01 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	Marjorie D Piado:	zo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

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		Docume	<u>nt Page 34 d</u>	ot 59	
Fill in this	s information to identify your	case:			
Debtor 1	Mariaria D Biada	70			
Debioi i	Marjorie D Piado First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0	-h				
Case num (if known)	nber				☐ Check if this is an
,					amended filing
					3
Officia	al Form 106H				
		obtoro			40/45
Sche	dule H: Your Cod	eptors			12/15
1. Do	thin the last 8 years, have you na, California, Idaho, Louisiana o. Go to line 3. is. Did your spouse, former spo olumn 1, list all of your codeb e 2 again as a codebtor only	you are filing a joint case, of unived in a community property, Nevada, New Mexico, Putuse, or legal equivalent live tors. Do not include your if that person is a guaran	operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	r y? (Community property states	ou. List the person shown
out				0 1 0 771 177 1	4 114
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Check all schedules that a	o whom you owe the debt
					-FF-7
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line _	
				☐ Schedule G, line	
	Number Street			<u> </u>	
	City	State	ZIP Code		
	•				
				_	
3.2				Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information	to identify your ca	ase:							
Del	btor 1	Marjorie D P	iadozo							
l	btor 2 buse, if filing)									
Uni	ited States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF IL	LINOIS					
	se number			-					ent showing	postpetition chapter lowing date:
0	fficial Form	106I					Ī	им / DD/ Y	YYY	
S	chedule I:	Your Inco	ome							12/1
spo atta	use. If you are sep ch a separate she	parated and you	are married and not fili r spouse is not filing w On the top of any additi	ith you,	do not include in	format	ion abou	t your spo	use. If mo	re space is needed,
1.	Fill in your emplinformation.	loyment		Debto	Debtor 1			Debtor 2 or non-filing spouse		
	If you have more		Employment status	■ Em	■ Employed			☐ Employed		
	attach a separate information about		Employment status	☐ Not employed				■ Not employed		
	employers.	Occupation		RN				Unemployed		
	Include part-time self-employed wo		Employer's name	Lake	Forest Hospita	ıl				
	Occupation may or homemaker, if		Employer's address		Vestmoreland F Forest, IL 6004					
			How long employed t	here?	1 year			_		
Pai	rt 2: Give De	tails About Mor	thly Income							
	imate monthly incuse unless you are		ate you file this form. If	you have	e nothing to report	for any	line, writ	e \$0 in the	space. Incl	ude your non-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine th	ne information for	all emp	loyers for	that perso	n on the lin	es below. If you need
							For De	btor 1	For Deb	tor 2 or g spouse
2.			ry, and commissions (b			2. 9	5 7	,735.00	\$	0.00

0.00

+\$

0.00

Estimate and list monthly overtime pay.

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Deb	tor 1	Marjorie D Piadozo	-	С	ase	number (if known)				
						Debtor 1	non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$_	7,735.00	\$		0.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	2,012.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	928.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	\$		0.00	
	5e.	Insurance	5e		\$	626.00	\$		0.00	
	5f.	Domestic support obligations	5f.		\$	0.00	\$		0.00	_
	5g.	Union dues	5g		\$_ \$	0.00			0.00	_
_	5h.	Other deductions. Specify:	_ 5h		· —		+ \$		0.00	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	3,566.00	\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,169.00	\$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$_	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		0.00	
	8d.	Unemployment compensation	8d		\$	0.00	\$		0.00	_
	8e.	Social Security	8e		\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.00	\$		0.00	_
	8g. 8h.	Pension or retirement income	8g 8h		\$_ \$	0.00			0.00	_
	OII.	Other monthly income. Specify:	_ 011	.+	Φ_	0.00	+ »		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	_	0.00	\$		0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,169.00 + \$		0.00	= \$	4,169.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		1,103.00		0.00	- [•] -	4,103.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•		chedule 11.	_	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	4,169.00
13.	Do	you expect an increase or decrease within the year after you file this form No.	?						Combi month	ned ly income
	=	Voc Evoluin:								

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ΞIII	in this informa	tion to identify yo	our case.			I			
	otor 1	Marjorie D P						if this is:	
	otor 2 ouse, if filing)						Α		ving postpetition chapter the following date:
Unit	ed States Bankı	uptcy Court for the	NORTH	IERN DISTRICT OF ILLIN	NOIS		М	M / DD / YYYY	
	e number nown)								
		rm 106J				•			
Be info	as complete ormation. If m		possible. eded, atta	If two married people a ch another sheet to this					
Par 1.	t 1: Desci	ribe Your House nt case?	hold						
	■ No. Go to	o line 2. s Debtor 2 live i	n a separ	ate household?					
	ΠY	es. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of D	ebtor	2.	
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		_	Dependent's age	Does dependent live with you?
	Do not state dependents				Dependent			5 month	□ No ■ Yes
					Dependent			6	□ No ■ Yes
					Dependent			7	□ No ■ Yes
									□ No □ Yes
3.	expenses o	penses include f people other to d your depende	han =	No Yes					
exp	imate your ex		our bankrı	uptcy filing date unless					pter 13 case to report f the form and fill in the
the		h assistance an		government assistance luded it on <i>Schedule I:</i>				Your expe	enses
4.		or home owners		ses for your residence. r lot.	Include first mortgage	e 4.	\$		1,070.00
	If not include	led in line 4:	-						
	4a. Real	estate taxes				4a.	\$		0.00
		rty, homeowner's	s, or renter	's insurance		4b.			0.00
	4c. Home	maintenance, re	pair, and ι	ıpkeep expenses		4c.	-		0.00
_		owner's associat				4d.			0.00
5.	Additional i	nortgage payme	ents for yo	our residence , such as h	ome equity loans	5.	\$		0.00

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Deb	otor 1	Marjorie	D Piadozo	Ca	se num	ber (if known)	
6.	Utiliti	ies:					
	6a.		heat, natural gas		6a.	\$	160.00
	6b.	Water, sew	er, garbage collection		6b.	\$	0.00
	6c.	Telephone	cell phone, Internet, satellite, and cab	e services	6c.	\$	160.00
	6d.	Other. Spe	cify:		6d.	\$	0.00
7.	Food		keeping supplies		- 7.	· -	1,100.00
8.			nildren's education costs		8.	\$	50.00
9.			y, and dry cleaning		9.	\$	275.00
		O ,	oducts and services		10.		100.00
		-	tal expenses		11.	\$	300.00
			Include gas, maintenance, bus or train	fare.		•	
		ot include ca			12.	\$	350.00
13.	Ente	rtainment, c	lubs, recreation, newspapers, maga	zines, and books	13.	\$	100.00
14.	Char	itable contr	ibutions and religious donations		14.	\$	20.00
15.	Insur	rance.	-			-	
	Do no	ot include ins	surance deducted from your pay or incl	uded in lines 4 or 20.			
	15a.	Life insurar	nce		15a.	*	310.00
	15b.	Health insu	rance		15b.	\$	0.00
	15c.	Vehicle ins	urance		15c.	\$	100.00
	15d.	Other insur	ance. Specify:		15d.	\$	0.00
16.			clude taxes deducted from your pay or	ncluded in lines 4 or 20.	_	-	
	Spec	,			_ 16.	\$	0.00
17.			ase payments:				
			nts for Vehicle 1		17a.		0.00
			nts for Vehicle 2		17b.		0.00
		Other. Spe			_ 17c.	\$	0.00
		Other. Spe			_ 17d.	\$	0.00
18.			of alimony, maintenance, and suppo		10	¢	0.00
40			our pay on line 5, Schedule I, Your I		18.	D	
19.			you make to support others who do	not live with you.	40	>	200.00
			t of sick parents		19.		
20.			rty expenses not included in lines 4	or 5 of this form or on Schedul			0.00
			on other property		20a.		0.00
		Real estate			20b.	·	0.00
			omeowner's, or renter's insurance		20c.		0.00
			ce, repair, and upkeep expenses		20d.		0.00
			r's association or condominium dues		20e.	·	0.00
21.	Othe	r: Specify:			21.	_+\$	0.00
22.	Calcı	ulate vour n	nonthly expenses				
		Add lines 4 t				\$	4.295.00
			(monthly expenses for Debtor 2), if an	v. from Official Form 106J-2		\$	4,230.00
						\$	4 205 00
	220. /	Auu iirie 22a	and 22b. The result is your monthly e	xperises.		Φ	4,295.00
23.	Calc	ulate your n	nonthly net income.				
	23a.	Copy line 1	2 (your combined monthly income) from	n Schedule I.	23a.	\$	4,169.00
	23b.	Copy your	monthly expenses from line 22c above		23b.	-\$	4,295.00
		·					,
	23c.	Subtract yo	our monthly expenses from your month	y income.			400.00
		The result i	s your monthly net income.		23c.	\$	-126.00
٠.	_						
24.			n increase or decrease in your expe				asa ar daerassa bessues of a
			i expect to finish paying for your car loan wit erms of your mortgage?	min the year of do you expect your mo	ı ıyage	payment to incre	ase or decrease because of a
	■ No		oo o. your mongago:				
			Evaloin horo:				
	☐ Ye	es. l	Explain here:				

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Fill in this infor	mation to identify your	case:			
Debtor 1	Marjorie D Piado				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
Declarat	tion About a	ın Individual	Debtor's So	chedules	12/15
years, or both. 1	y or property by fraud ii l8 U.S.C. §§ 152, 1341, 1 in Below	n connection with a ban 519, and 3571.	kruptcy case can result	in fines up to \$250,00	00, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules fil	ed with this declaration	on and
X /s/ Ma	rjorie D Piadozo		X		
Marjor	rie D Piadozo ure of Debtor 1		Signature of	of Debtor 2	

Date

Date **January 2, 2018**

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Fill i	n this inform	ation to identify you				
Debt	or 1	Marjorie D Piado	Middle Name	Last Name		
Debt						
(Spous	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case (if know	e number				_	Check if this is an amended filing
Sta Be as	complete a	of Financial And accurate as possione space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write yo	
Part). Answer every ques etails About Your Ma	stion. rital Status and Where You	Lived Before		
		current marital statu	s?			
] [■ Married □ Not marr	ried				
2. [Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
] [■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
states 	and territorie No	es include Arizona, Ca		vada, New Mexico, Puerto Ri	ity property state or territor co, Texas, Washington and V	
Part	2 Explair	n the Sources of You	r Income			
F	Fill in the total	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calendar uary 1 to De	year: cember 31, 2017)	■ Wages, commissions, bonuses, tips	\$80,679.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known)

Document Debtor 1 Marjorie D Piadozo

				Debtor 1					Debtor 2		
				Sources of Check all t		(bef	ess income fore deductions lusions)	and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		dar year bef December 3		■ Wages bonuses, t	, commissions, iips		\$72,74	6.00	☐ Wages, combonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a	business	
	the calen	dar year: December 3	31, 2015)	■ Wages bonuses, t	, commissions, iips		\$65,054	4.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a	business	
	and other winnings. List each s	public benefi If you are filir	t payments; ng a joint cas ne gross inco	pensions; re e and you h		est; div ou rec	vidends; money eived together,	collecte list it on	ed from lawsuits; ly once under De	royalties; and ebtor 1.	curity, unemployment, gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe b		eac (bef	ess income from th source fore deductions lusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pay	ments You	Made Befo	re You Filed for I	Bankrı	uptcy				
6.	□ No.	Neither De individual p During the S No. Yes * Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo	personal, fare you filed a cach creditor. Do no payments to con 4/01/19 r both have re you filed	amily, or househol for bankruptcy, did r to whom you pai	d you p d a tota ts for c nis ban s after d you p	ebts. Consume ose." pay any creditor of \$6,425* or domestic supporter case. that for cases filebts. pay any creditor of the case of the	more in rt obliga	of \$6,425* or mo one or more pay tions, such as ch or after the date o	re? rments and th ild support ar f adjustment.	(8) as "incurred by an e total amount you and alimony. Also, do
		⊔ Yes		ments for do	omestic support of						creditor. Do not not not not not not not not not no
	Creditor'	s Name and	Address		Dates of payme	nt	Total amou	unt aid	Amount you still owe	Was this p	ayment for

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7.	Within 1 year before you filed for bankruptc Insiders include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which securities; and	you are a genera any managing a	al partner; corporations gent, including one for
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you still owe		this payment
3.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosider. No Yes. List all payments to an insider		paid ments or transfer a			ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
Pai	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. No Yes, Fill in the details.	y, were you a party in an				
	Case title	Nature of the case	Court or agency		Status of th	e case
	Case number Portfolio Recovery Ass v. Marjorie D Piadozo 17SC-2974	Breach of Contract	Lake County 18 N. County S Waukegan, IL 6		■ Pending □ On appe □ Conclude	al
	Capital One v. Marjorie D Piadozo 17 SC 03967	Breach of Contract	Lake County 18 N. County S Waukegan, IL 6		■ Pending □ On appe □ Conclude	al
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garr	nished, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Dat	te	Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.			ancial instituti	on, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Dat tak	te action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an ■ No □ Yes		rty in the possessi			efit of creditors, a

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Case number (if known) Document Debtor 1 Marjorie D Piadozo

Pai	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	ptcy, c	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup ☐ No	ptcy, c	did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con	ntributi	ion.		
	Gifts or contributions to charities that tot: more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value
	St Mary of Vernon Catholic Church 236 US-45 Vernon Hills, IL 60061		Cash	Monthly	\$20.00
Pai	t 6: List Certain Losses				
15.	or gambling?	tcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	Yes. Fill in the details.	3000ri	ika any inavyana any ara far tha laca	Date of your	Value of property
	how the loss occurred	nclude	ibe any insurance coverage for the loss the amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pre	eparii	id you or anyone else acting on your behalf pay ng a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Bizar & Doyle, LLC 123 West Madison Street Suite 205 Chicago, IL 60602 joe@bizardoylelaw.com		Attorney Fees	2017	\$850.00
17.	Within 1 year before you filed for bankruptor promised to help you deal with your creditor Do not include any payment or transfer that you	tors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address		transferred	or transfer was made	payment

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Case number (if known) Document

Debtor 1 Marjorie D Piadozo

18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as t	airs? the granting of a	, ,		,
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and very property transfer		payme	be any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
19.	beneficiary? (These are often called asset-pro		y property to a	self-settled	d trust or similar device	of which you are a
	Yes. Fill in the details. Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was
	Nume of trust	Description and t	alue of the pre	porty trails	iorica	made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Units	S	
20	Mithin 4 year hefere you filed for honkrymte	v ware any financial co	aaunta ar inat	manta hal	ld in varre name as fas :	rough about
20.	Within 1 year before you filed for bankruptc; sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc	or other financial accou	nts; certificate:	s of deposit	•	
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	bankruptcy, a	ny safe dep	osit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year befor	e you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.			ude any prope	rty you borr	owed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Info	ormation				
	the purpose of Part 10, the following definition					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Marjorie D Piadozo

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

naz	ardous material, pollutant, contaminant,	or similar term.				
ort a	II notices, releases, and proceedings that	at you know about, regardless of wher	the	y occurred.		
Has	any governmental unit notified you that	you may be liable or potentially liable	und	ler or in violation of an environme	ntal law?	
	No					
	Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
Hav	e you notified any governmental unit of	any release of hazardous material?				
	No Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.	
	No Yes. Fill in the details.					
		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
t 11:	Give Details About Your Business or	Connections to Any Business				
Wit	nin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of	the following connections to any	business?	
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	eith	er full-time or part-time		
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
☐ A partner in a partnership						
	☐ An officer, director, or managing ex	ecutive of a corporation				
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation				
	No. None of the above applies. Go to F	Part 12.				
			S.			
		Describe the nature of the business				
		Name of accountant or bookkeeper		Dates business existed		
		cy, did you give a financial statement t	to an	nyone about your business? Inclu	de all financial	
	No					
	Yes. Fill in the details below.					
Ad	dress	Date Issued				
	ort a Hass Nad Ad Hav Na Ad Hav Bu Ca: Ca: Wittl Wittl Na Ad Na Ad	As any governmental unit notified you that No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adm No Yes. Fill in the details. Case Title Case Number Case Number Within 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability comp A partner in a partnership An officer, director, or managing extended the self-employed in the self-emp	ort all notices, releases, and proceedings that you know about, regardless of wher Has any governmental unit notified you that you may be liable or potentially liable. No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any envious No Yes. Fill in the details. Case Title Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement institutions, creditors, or other parties.	ort all notices, releases, and proceedings that you know about, regardless of when the Has any governmental unit notified you that you may be liable or potentially liable und No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any environr No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) 112. Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of A nember of a limited liability company (LLC) or limited liability partnership (L A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) No Wes. Fill in the details below. Name Date Issued Address Name Address Name Address Name Address Name Address Name of accountant or bookkeeper	ort all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environment of the same your potential points of the same your potential you had you may be liable or potentially liable under or in violation of an environment of the yes. Fill in the details. Name of site	

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

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Debtor 1 Marjorie D Piadozo

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Marjorie D Piadozo	
Marjorie D Piadozo	Signature of Debtor 2
Signature of Debtor 1	
Date January 2, 2018	Date
Did you attach additional բ	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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	Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is	Debtor 1	Marjorie D Pia	dozo		
(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number [if known) Check if this is	(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number [if known) Check if this is		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is	Debtor 2				
Case number Check if this is	Case number Check if this is	(Spouse if, filing)	First Name	Middle Name	Last Name	
	amended filing	(if known)				☐ Check if this is ar
amended filing						amended filing
		Official Fo	orm 108			
Official Form 108	Official Form 108	Ctatama		ion for Individu	ials Filing Under	Chamter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Marjorie D Piadozo		Case number (if kr	nown)
name: Descrip propert securin	у	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
or any u	rmation below. Do not list real estate I	y Leases you listed in Schedule G: Executory Contracts and Unex eases. Unexpired leases are leases that are still in effect y lease if the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe	your unexpired personal property leas	ses	Will the lease be assumed?
Lessor's r Descriptic Property:	name: on of leased		□ No
Lessor's r Descriptic Property:	name: on of leased		□ No
Lessor's r Descriptic Property:	name: on of leased		□ No
Lessor's r Descriptic Property:	name: on of leased		□ No
Lessor's r Descriptic Property:	name: on of leased		□ No
Lessor's r Descriptic Property:	name: on of leased		□ No
Lessor's r Descriptic Property:	name: nn of leased		□ No
Part 3:	Sign Below nalty of perjury, I declare that I have inc	dicated my intention about any property of my estate tha	
	hat is subject to an unexpired lease.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Mar	Marjorie D Piadozo jorie D Piadozo ature of Debtor 1	Signature of Debtor 2	
Date	January 2. 2018	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-00028 Doc 1 Filed 01/02/18 Entered 01/02/18 13:51:26 Desc Main Document Page 53 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Marjorie D Piadozo		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid to	o me, for services rendered or to
	For legal services, I have agreed to accept		\$	850.00
	Prior to the filing of this statement I have received		\$	850.00
	Balance Due		<u> </u>	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person t	unless they are member	ers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects	s of the bankruptcy ca	se, including:
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor 	ement of affairs and plan which ors and confirmation hearing, an educe to market value; exe ns as needed; preparation	may be required; d any adjourned heari mption planning;	ings thereof;
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis proceeding.	e does not include the following schargeability actions, judio	service: cial lien avoidance	s or any other adversary
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for	payment to me for rep	presentation of the debtor(s) in
١,	January 2, 2018	/s/ Joseph R. Doy	le	
_	Date	Joseph R. Doyle (Signature of Attorne) Bizar & Doyle, LL(123 West Madisor Suite 205	5279065 _y C	
		Chicago, IL 60602		
		312-427-3100 Fax joe@bizardoylela		
		Name of law firm		

Case Biz AG & DOGY	Fied 01/02/18 BANKRUPTC	13:51:26 Desc Main Y CONTRACT
SECURED DEBTS 1st Mortgage /Arrears 2nd Mortgage /Arrears Automobile #1 Automobile #2 PMSI Non-PMSI Other TOTAL \$	WINSECURED DEBTS POTAL \$	NON-DISCHARGEABLE Taxes Student Loans Child Support NSF Parking Tickets Govt. Debt Other TOTAL \$
Cosigned debt (Y/N) Wage assignment (Y/N) 722 Redemption (Y/N) CHAPTER 7 - climinates dischargea	6767	Garnishment (Y/N) IRS Determination (Y/N) Judgment lien motion (Y/N)
CHAPTER 13 - debt consolidation p ESTIMATED Chapter 13 payment plan to t	PAYABLE in four (4) installm CASHIER'S CHECK FOR \$335.00 PAYABLE DUNTIL ATTORNEYS FEES ARE PAID IN I lan the Chapter 13 Trustee:	
CHAPTER 13 ATTORNEY'S FEE Today you paid us \$ retainer. Your PAYMENT PLAN: \$	\$(filin	g-fee not included)
FILING FEE(MONEY ORDER OR CASHII REMAINING BALANCE of \$ The above fee is for pre-confirmation work only. All post records you have provided and is subject to change based of some non-dischargeable debts could survive the Chapter 13.	ER'S CHECK FOR PAYABLE TO THE BIZAR & T will be paid to us through your Chapter confirmation work is billed at \$275.00 per hour. The Chapter creditor claims, changes in your net income and expending Bankruptcy.	OYLE, LLC) 13 Plan payments to the Trustee. 13 payment above is just an estimate based on the sees or changes in state or federal law. Please be aware,
to fully disclose all financial information to BIZAR & DOYLE that it is a Federal crime to omit a creditor or other information the last payment date. Attorney's advice to client is based on or related to changes in the law that affect client's ability to quality any client delay should the law change. Pay in full immediate give client. 3) STATE LAW PROCEEDINGS- Client must matters and will not represent any bankruptcy client in ANY st show cause or any other civil or criminal lawsuits. Client is a chooses to terminate BIZAR & DOYLE, LLC's services and cancellation. BIZAR & DOYLE, LLC's hourly rate is \$275 DOYLE, LLC as-client's attorneys. About receiving written nunearied attorneys fees paid to date. 5) COLLECTIONS-If1 Client is liable for all attorneys fees and costs incurred to colle written request, certified mail, return receipt requested, COUNSELING/FINANCIAL MANAGEMENT - Every confess for Amending Bankruptcy Schedules. \$231 to amend omitted. There is no charge to amend for a change of address. is filed. Client agrees to call BIZAR & DOYLE, LLC three we BIZAR & DOYLE, LLC still has to appear at the hearing ever discharge. BIZAR & DOYLE, LLC's fee for negotiating as a discharge issue is \$275 per hour, ten hours to be paid in advancient delays in paying the fees, returning the petition or in prodocuments of information. Avoiding Liens/Redemptions-Client delays in paying the fees, returning the petition or in prodocuments of information. Avoiding Liens/Redemptions-Client with the more paid prior to BIZAR & DOYLE, LLC drafting such motion. On the lien will survive the bankruptcy. Client acknowledges that plus \$260.00 filing fee for any motion to reopen a closed bank to BIZAR & DOYLE, LTD for any returned checks not honor attorney may work on different aspects of client's case. Cliexpense, to work on this matter and divide fees with them on within the firm, or outside counsel review client's file to explore.	in from a bankruptcy petition. 2) TIMELY PAYMENT/L current applicable Local, State and Federal laws. Client agrey for bankruptcy relief or to discharge debts within a bankruptcy for bankruptcy relief or to discharge debts within a bankruptcy so BIZAR & DOYLE, LLC can file client's case or risk to personally appear at any and all state court proceedings. In a tellaw matter, including, but not limited to, divorce proceed advised to attend all state court proceedings, unless specific representation at any time; client is only entitled to a refund per hour for purposes of determining what refund client per hour for purposes of determining what refund client per hour for purposes of determining what refund client per hour for purposes of determining what refund client billiam and the debt, including court costs. 6) RESCISSIONS- Client BIZAR & DOYLE, LLC is unable to collect its fees pursuar to the debt, including court costs. 6) RESCISSIONS- Client BIZAR & DOYLE, LLC no less than 15 days ent must receive credit counseling from an "approved nonput management course within 45 days of the 1st date set for the BIZAR & DOYLE, BIZAR & DOYLE, Including client specifically specified to add additional creaming court date or 341 meeting. Client must attend a receks after client's case has been filed to obtain the \$341 menting if client does not and will charge \$200 additional fee for ettlement is approximately \$350 to be paid in advance of the country interests (\$375), or redemptions on the country security interests (\$375), or redemptions on client understands and agrees that if client does not pay the there is a limited time to bring such motions. Motion to recount the basic sof usely and represential the content of the part	as of client's intentions to repay such debts and understands AW CHANGES - Client agrees to pay fees in full prior to ees to hold BIZAR & DOYLE, LLC harmless for damages aptcy case. BIZAR & DOYLE, LLC are not responsible for hat court rulings and law changes could alter the advice we BIZAR & DOYLE, LLC does not represent client in these lings, contempt hearings, citation to discover assets, rules to cally advised otherwise in writing. 4) REFUNDS-If client a of uncarned fees. Client must submit a written request of its entitled to in the event that client discharges BIZAR & days to do an accounting and issue a refund check of any at to this contract, we will refer your account to collections. In may only rescind a reaffirmation agreement by sending a prior to the bar date for rescissions. 7) CREDIT rofit budget and credit counseling agency" within 180 days your Section 341 meeting of creditors hearing. Take the court costs and filing fees, client agrees to pay additional editors and/or to list additional assets that were previously \$341 meeting approximately four weeks after client's case eeting date if client has not received notice of the meeting. each missed court date/hearing. Adversary objections to settlement. BIZAR & DOYLE, LLC's fee for litigating a charge a minimum of \$150 for additional fees due to any appraisals, proof of insurance, titles or any other requested llowing additional fees for services to avoid judgment liens wehicles (\$600) These additional fees are to be fee, BIZAR & DOYLE, LLC will not bring the motion and open a closed bankruptcy case-Client agrees to pay \$375 need checks-Client agrees to pay a \$30 bounced check fee E/ CO-COUNSEL- Client understands that more than one lor independent attorneys, at BIZAR & DOYLE, LLC's
Signature V IVIV 1 / M.	DATE: T	DATE

Document

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

	Marjorie D Piadozo		Case N	o
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR I	DEBTOR(S)
c	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be pa	aid to me, for services rendered or to
	For legal services, I have agreed to accept		\$	850.00
	Prior to the filing of this statement I have received	1	\$	850.00
	Balance Due	***************************************	 \$	0.00
2. 1	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. 7	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. l	I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mo	embers and associates of my law firm.
i	I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n			
5.]	n return for the above-disclosed fee, I have agreed to	render legal service for all aspec	cts of the bankrupto	y case, including:
t c	Analysis of the debtor's financial situation, and rene Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed]	atement of affairs and plan whic	h may be required;	
C	Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on h	ions as needed; preparatio		
	reaffirmation agreements and applicat	ions as needed; preparatio ousehold goods.	n and filing of m	otions pursuant to 11 USC
	reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on heavy agreement with the debtor(s), the above-disclosed for Representation of the debtors in any description.	ions as needed; preparatio ousehold goods.	n and filing of m	otions pursuant to 11 USC

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United States Bankruptcy Court Northern District of Illinois

In re	Marjorie D Piadozo		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	23
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	rs is true and	correct to the best of my
Date:	January 2, 2018	/s/ Marjorie D Piadozo Marjorie D Piadozo Signature of Debtor		

American Medical Collection Agency 4 Westchester Plaza Building 4 Elmsford, NY 10523

Bk Of Amer Po Box 982238 El Paso, TX 79998

Blitt & Gaines 661 Glenn Ave. Wheeling, IL 60090

Capital Management Services 726 Exchange St. Suite 700 Buffalo, NY 14210

Capital One 15000 Capital One Dr Richmond, VA 23238

Convergent PO Box 1022 Wixom, MI 48393

Dsnb Macys Po Box 8218 Mason, OH 45040

First Source 205 Bryant Woods South Buffalo, NY 14228

Harris & Harris, Ltd. 111 West Jackson Blvd. Suite 400 Chicago, IL 60604

IL Department of Revenue* PO BOX 64338 Chicago, IL 60664-0338

Lab Corp PO Box 2240 Burlington, NC 27216

Lake Forest Pediatrics 900 N Westmoreland Rd., #110 Lake Forest, IL 60045

LCA Collections PO Box 2240 Burlington, NC 27216

LTD Financial Services, LP 7322 Southwest Freeway Suite 1600 Houston, TX 77074

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Northshore University Health System 9532 Eagle Way Chicago, IL 60678

Northwestern Medicine 28155 Network Place Chicago, IL 60673

OB Gyne Associates of Lake Forest 700 Westmoreland Rd. Building C Lake Forest, IL 60045

Onemain Po Box 1010 Evansville, IN 47706

Pinnacle Management Services 514 Market Loop, Suite 103 Dundee, IL 60118

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502 Sanjay S. Jutla 55 E. Jackson, 16th Floor Chicago, IL 60604

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440